

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000080118

1. Entity Name

EMERALD COAST FINANCIAL MANAGEMENT, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90101 019 ***150.00

Principal Place of Business

Mailing Address

4003 EAST C-30A
SANTA ROSA BEACH FL 32459

4003 EAST C-30A
SANTA ROSA BEACH FL 32459

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3470920

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHIELDS, JEREMY
7522 FRONT BEACH RD
PANAMA CITY BCH FL 32407

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP
NAME ALLEN, WILLIAM L
STREET ADDRESS 2401 STANFORD RD APT 401
CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Delete

TITLE PRESIDENT
NAME MARK S. DUTRAM
STREET ADDRESS 238 OLD HIGHWAY 98
CITY-ST-ZIP DESTIN, FL 32541 ☐ Change ☒ Addition

TITLE D
NAME WILLIAMS, J. C DR
STREET ADDRESS 801 E SIXTH ST STE 504
CITY-ST-ZIP PANAMA CITY FL 32401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ANDREWS, ANGUS G
STREET ADDRESS PO BOX 405 N/A
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BARRETT, MARK R
STREET ADDRESS 99 RACETRACK RD NW STE 300
CITY-ST-ZIP FT WALTON BCH FL 32547 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BENNET, MICHAEL
STREET ADDRESS 15606 FRONT BEACH RD
CITY-ST-ZIP PANAMA CITY BCH FL 32408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME DUNKEL, GERALD
STREET ADDRESS 1234 AIRPORT RD STE 124
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)